				CONTRACTOR CONTRACTOR AND AND ASSESSMENT	ti di Santa di Mala anti a Mala anti Mala anti di Santa d		
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Complete if Known				
FEE TRANSMITTAL			Application Number		10/773,559		
			Filing Date 2/6/20				
For FY 2009			First Named Inventor		ni Kobayashi	***************************************	
Applicant claims small entity status. See 37 CFR 1.27			Examiner Name		e		
			Art Unit				
TOTAL AMOUNT OF PAYMENT (\$) 490.00			Attorney Docket 1217 - 040223			en an den describense gan et den en en de paper de men egan ann en en en en e	
METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order Other (please identify):							
Deposit Account Deposit Account Number: 23-0650 Deposit Account Name:							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee							
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17							
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card							
information and authorization on PTO-2038.							
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES EXAMINATION FEES							
FILING FEES Small Entity				mall Entity			
Application Type Fee (\$) Fee (\$)			Fee (\$)	Fee (\$)	Fe	es Paid (\$)	
Utility 330 82	540	270	220	110			
Design 220 110	100	50	140	70	<u> </u>		
Plant 220 110	330	165	170	85			
Reissue 330 165	540	270	650	325			
Provisional 220 110	0	0	0	0	***************************************		
2. EXCESS CLAIM FEES						Small Entity	
Fee Description Fee (\$)) <u>Fee (\$)</u>	
Each claim over 20 (including Reissues) 52						26	
Each independent claim over 3 (including Reiss				220	110		
Multiple dependent claims		6)	T TO 1 1 (0)		390	195	
<u>Total Claims</u> <u>- 20 or HP</u> <u>Extra C</u>			Fee Paid (\$)		<u>Multiple</u> Fee (S	e Dependent Claims S) Fee Paid (\$)	
HP = highest number of total claims paid for, if greate	x r than 20.				ree (3	b) <u>ree raid (5)</u>	
Indep. Claims - 3 or HP Extra C	aims Fee	(Z)	Fee Paid (\$)				
indep. Ciamis - 5 of III Extra Ci	X Y	= m	ree raid (3)				
HP = highest number of independent claims paid for, i		 -					
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under							
37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof.							
See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) -100 = /50 = (round up to a whole number) x =						<u>Fee Paid (\$)</u>	
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)						Fees Paid (\$)	
Other (e.g., late filing surcharge): Petition for Extension of Time						\$490.00	
SUBMITTED BY	7 . 1	In	-i				
Signature Registration No. (Attorney/Agent) 25,826 Telephone 412-471-8815							
Name (Print/Type) Kent E. Baldauf Date January 29, 2009							